

A publication of the DCFS
Hispanic Advisory Committee

Noticias

Rod R. Blagojevich, Governor
Bryan Samuels, Director

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17th Annual Hispanic
Family Institute Day



Latino Children: Preserving Them Within
Their Family, Within Our Community/
Niños Latinos: Manteniéndolos En La Familia
Y En Nuestra Comunidad



November 9 & 10, 2005

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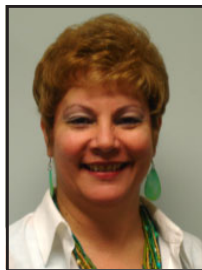
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Welcome from the Chairperson

Miriam Mojica

¡Saludos! en este Año Nuevo 2006.

Un año por delante y una agenda de trabajo más intensa. Este año nuestros frutos comienzan a desarrollarse y ustedes podrán ver como muchos de los proyectos que hemos estado trabajando ya se van materializando.

Since my first *Noticias* welcome message in the Fall Edition 2005, the Hispanic Advisory Committee (HAC) has been invested in several projects to ensure that our Latino families & children receive the services to which they are entitled. Mostly we have been working with Director Samuels to ensure workers have their voice and concerns heard. We take pride in conveying your concerns to him.

In November 2005, members of HAC met with Director Samuels and submitted in conjunction with the African American Advisory Council our final "Incarcerated Youth Report" with recommendations for the Incarcerated Youth Population. This project began on December 16, 2002. In addition, we presented on immigration issues for our children in care. HAC looks forward to continued collaboration with Director Samuels and his deputies to ensure that quality and equitable services and resources are provided to Latino families and children

On October 26, 2005, we announced our Hispanic Family Institute Day at the Kick-Off event sponsored by the Latino Consortium at Garfield Park Conservatory. HAC sponsored the 17th Hispanic Family Institute Day held at the Sheraton Chicago Northwest Hotel in Arlington Heights on November 9 and 10, 2005. On January 13, 2006, we celebrated Octavitas 2006 for DCFS bilingual staff.

Our HAC members all contributed in one way or another to each of these activities. Gracias! I recognize we cannot do it alone, therefore we encourage your participation and would like to take this opportunity to request your input and feedback. Please feel free to call me at 708-338-6692 or email me at MMojica@idcfs.state.il.us.

"We cannot seek achievement for ourselves and forget about progress and prosperity for our community ...

Our ambitions must be broad enough to include the aspirations and needs of others, for their sake and for our own."

Cesar Chavez

Les deseo un Feliz Año 2006. I want to wish you a prosperous 2006.

¡Adelante!

Miriam Mojica, MSW

Hispanic Advisory Committee Chairperson

The focus is on you

In every issue of Noticias we will be focusing on a different Spanish Speaking bilingual employee. In this issue we would like to introduce you to the DCFS Guardian, D. Jean Ortega-Pirón. If you know of someone we should highlight, please send an email to Julia Camacho de Monzón.

Hi, my name is D. Jean Ortega-Pirón. I just celebrated my 25th year with the state and currently serve as the Illinois Department of Children and Family Services (DCFS) Guardian. I was born in Chicago and lived in an area between Logan Square and Humboldt Park called Palmer Park. I attended St. Sylvester's school through 6th grade, and then my parents moved us out to DuPage County where I continue to live. I went to Rosary College and attended Chicago Kent Law School. My father is from Queretaro, Mexico and my mother was born in Louisiana.

My career with the state began at the Illinois Department of Mental Health and Developmental Disabilities (DMHDD). I started on contracts as a law clerk on June 1, 1980. I stayed there for seven years in various capacities, eventually becoming their Chief Legal Counsel.

In June 1987, I left DMHDD to come to DCFS and create the Administrative Hearings Unit. In 1994, I left DCFS to work for Governor Edgar in his newly created Office of Special Counsel for Child Welfare Services. In 1996, I came back to DCFS as the Guardian, and the rest is history!

I decided to become an attorney when I was 14. A situation involving the police and a family member occurred which I felt was unjust. I rode my bike to the library to

look up the laws the officer cited and couldn't really understand how to use the statutes or what they meant. While the incident was not serious, I felt that I needed to understand the law better so that in the future I would be able to understand our rights and help others. I think that the law

was written to assist us but it didn't feel that way. It was at that moment, standing in the library, that I decided to be a lawyer.

In the child welfare context, my number one challenge is to ensure that everything that I do or say benefits children and in no way causes any harm or further trauma. I recognize that the decisions I make daily can really affect children's lives

in a serious way, so I constantly pray for guidance and try to keep myself aware that I need to obtain as many facts as I can before I proceed. I try to put myself in the children's positions and figure out how they are processing what is going on in their lives before I make decisions affecting them. In order to do this, I have to slow myself down, really try to feel the pain that they sometimes experience, and then rely on many other individuals' information, which must be accurate.

I realize that my efforts are only a minute portion of the totality of work that is being done on behalf of children and I could not have done anything for children without so many individuals' assistance. I have been extremely blessed by God to serve children; it is a special privilege. I once read a quote that I think provides an important perspective about the work that we do. It is, "We make a living by what we get, but we make a life by what we give." During the frustrating moments of a day, I try to remember this quote.



D. Jean Ortega-Pirón



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All kids need is a little help, a little hope and somebody who believes in them.

Earvin "Magic" Johnson

Kickoff Reception Launched the 17th Annual Hispanic Family Institute Day

The Latino Consortium served as the sponsor of the 2005 Kickoff Reception to launch the 17th Annual Hispanic Family Institute Day. The Kickoff Reception took place on Wednesday, October 26, 2005, at the Garfield Park Conservatory in Chicago, which is one of the largest and most stunning conservatories in the nation, and is often referred to as “landscape art under glass.”

Welcome remarks by Kenny Martin-Ocasio, co-chair of the Latino Consortium, were delivered to community leaders, politicians, academics, and diplomats from Latin American consulates, and social service providers. After his welcome remarks Mr. Martin-Ocasio talked about the theme of the 17th Annual Hispanic Family Institute Day: “Latino Children: Preserving Them within Their Family, Within Our Community/Niños Latinos: Manteniéndolos en la Familia y en Nuestra Comunidad,” and about the responsibility all social service providers and event participants have with our Latino children and their families. Mr. Martin-Ocasio introduced Mr. Bryan Samuels, Director of the Illinois Department of Children and Family Services. Mr. Samuels’ remarks also welcomed all participants and reflected on the similarity the theme of the 17th Hispanic Family Institute Day had with the Department’s focus on a “Lifetime Approach” to child welfare. His reflection

reminded us “that the decisions we make today have an impact over the entire life of the children and families we serve, and that children need connections to family, community, and culture to nurture a healthier and more productive life.” He also invited all Kickoff attendees and Institute Day participants to enhance the skills they already possess, learn new strategies, and discover new tools that will support them in the important role they play in the communities they serve and in the lives of our Latino children and families.

The 2005 Kickoff Reception also presented the 2005 Celeste Peña Community Service Award. This important award was presented by Miriam Mojica, chair of the Hispanic Advisory Committee, and Julian and Mario Peña from the Peña family to Carmen Flores Rance for her commitment to Latino children and their families. Mrs. Flores Rance was selected as she has inspired and touched the lives of hundreds of children and families in ways nobody

had done before. Her long and productive history of working with Latino families and children, strong community involvement, and dedication to promoting and enhancing the field of social work made her the recipient of the 2005 Celeste Peña Community Service Award. As recipient of this award, Mrs. Flores Rance took the opportunity to thank the awards subcommittee of the Hispanic Advisory Committee, the Peña family, and reception attendees. After the



Julian Pena, Miriam Mojica and DCFS Director Bryan Samuels presented Carmen Flores Rance with the “Celeste Peña Community Service Award” for her commitment to Latino children and their families.

appreciative remarks, she shared some of her most cherished and memorable experiences she had with Mrs. Peña when they worked together years ago at the beginning of their careers. She also took the opportunity to thank her loving and caring parents, who have fostered more than 100 children over the years, for teaching her to share and give back to her community her very best every day of her life. At the end of her remarks she dedicated the award to her parents and invited everybody to continue helping the communities in which they live.

The success of the 2005 Kickoff Reception was possible thanks to the participation of the Latino Consortium Members: Arden Shore, Association House of Chicago, Casa Central, Catholic Charities of Chicago, CAUSES, Chicago Commons, ChildServ, Lifelink Corporation, and Youth Outreach Services, and to the participation of the co-sponsors: Loyola University of Chicago-School of Social Work, the Peruvian Cultural Center, and the Macchu Picchu Group that delighted participants with its outstanding performance.



Carmen Flores Rance was 2005’s recipient of the “Celeste Peña Community Service Award”. She dedicated the award to her parents and invited everybody to continue helping the communities in which they live.

17th Annual Hispanic Family Conference (Institute Day)

By Sylvia Fonseca

The 17th Annual Hispanic Family Institute Day was held on November 9 & 10, 2005, at the Sheraton Chicago Northwest Hotel. The theme “Latino Children: Preserving Them Within Their Family, Within Our Community/Niños Latinos: Manteniéndolos En La Familia Y En Nuestra Comunidad.” The theme reflected best practice.

The Office of Latino Services, Hispanic Advisory Committee, Latino Consortium, Office of Training, and Conference Planning Committee came together to plan and facilitate this venture for another year. Director Samuels reconfirmed his commitment to ensuring that quality training is provided to frontline staff with an emphasis on the important role that culture and language have when providing services to our children and families.

There was a wide range of workshops, which included a piloted Latino training module from Loyola University of Chicago—School of Social Work, in which the participants provided invaluable recommendations for improving and clarifying the program. The goal of the Loyola project is to serve as a Latino training model, on a statewide and possible national level, to train social service providers to provide culturally appropriate services to our Latino children and families.



The keynote speaker, Juan Ortiz, shared his personal experience as a child who lived with domestic violence. He shared the confusion and embarrassment he felt as a Latino child when the well-intended social service providers responded to his situation without cultural sensitivity and with the obstacle of the language barrier. He emphasized how important taking into account language barriers and culture is to help families understand information and to help them through their situations. His presentation was heartfelt and emotional; he acknowledged that being a social service provider is one of the hardest and often most thankless jobs. He stood as a testimony to all of us who are or have been social service providers — that our work matters. He graciously thanked us all on behalf of those children and families who may never had the opportunity to do so.

The driving force behind last year's Institute Day was the commitment and unity of all the professionals involved with formatting, planning, and securing this successful conference. The efforts highlighted the knowledge, the expertise, the desire, and the diversity of individuals who joined in the structuring of this event. We would like to acknowledge the enormous amount of time, energy, and commitment that Jose Lopez, Deputy Chief of Latino Services, spent in the evenings and weekends working on behalf of the 17th Annual Hispanic Family Institute Days.

We hope that some of you will make a commitment to be a part of this year's 18th Annual Hispanic Family Institute Planning Committee. If you are interested please contact this year's committee chairperson, Dahlia Roman at (847) 888-7637 or via email at DRoman@idcfs.state.il.us.



Conference Keynote Speaker Juan Ortiz shared the confusion and embarrassment he felt as a Latino child living with domestic violence and emphasized the importance of taking language barriers and culture into account when helping families through difficult domestic violence situations.

We look forward to hearing your ideas and having your input in making this year's Hispanic Family Institute Days even better than last year's.

Congratulations!

Congratulations to the staff, foster parents and youth who were the recipients of the Awards and Certificates at the 17th Annual Hispanic Institute Day.

DCFS Employee of the Year:

Mario Castro

POS Employee of the Year:

Monica Bandino

Foster Parents of the Year:

Vickie and Ishmael Hernandez

HIV/AIDS in the Latino Community

by Elizabeth Monk, LCSW, DCFS AIDS Project Director, Clinical Services Division

October 15, 2005, marked the commemoration of the third annual National Latino AIDS Awareness Day. Historically, Latinos in the United States have been disproportionately affected by HIV/AIDS. Latinos comprise 14 percent of the U.S. population, yet from 1981 through 2003, they accounted for 19 percent of total AIDS cases reported to the Centers for Disease Control and Prevention. In recent years the impact of the disease has increased among Latino women and children. This demographic change underscores the urgent need to address the disastrous effects of HIV/AIDS within the entire Latino community.

Latino communities face many obstacles in the fight against HIV/AIDS, including cultural stigma associated with HIV/AIDS, misconceptions and lack of knowledge about the disease, language barriers, lack of access to adequate healthcare, and high poverty. Consequently, we must raise awareness of HIV/AIDS and encourage all communities, especially the Latino community, to promote comprehensive HIV prevention programs, to support strong care and treatment programs, to encourage friends and family members to be tested for HIV, and to support efforts to find a vaccine and a cure. (Adapted from the Statement of Anthony S. Fauci, M.D., Director, National Institute of Allergy and Infectious Diseases)

HIV/AIDS continues to affect families and children.

Despite what the media would have us think, HIV/AIDS has not gone away. Since 1981, more than 46,000 people in Illinois have been diagnosed with HIV/AIDS. Nearly 6,000 are Latino. The total number of Illinois cases is the sixth highest total in the U.S., trailing New York, California, Florida, Texas and New Jersey. (Illinois Department of Public Health HIV/AIDS Section Surveillance Program.)

A recent report of the Centers for Disease Control (CDC) calculated that 70 percent of the HIV cases were among men and 30 percent were among women. However, among adolescents aged 13-19 years old, the number of girls and young women with

HIV increases to 56 percent. Moreover, women of color represent 80 percent of female infections, with 17 percent being Latina. More than two-thirds of cases among women and adolescent girls can be attributed to heterosexual transmission. For males, two-thirds of the cases can be attributed to men who have sex with men, while 21 percent of the men reported injection drug use as the source of their HIV.

Families and youth involved with the child welfare system are at higher risk because of a greater history of substance abuse, sex abuse, and unprotected sex with multiple partners. The DCFS AIDS Project began tracking cases and providing services in 1989. Since that time we have served 1,511 clients with HIV/AIDS. Of these clients, 325 are children and adolescents who are or have been in DCFS custody. In addition, we cannot forget that more than 3,500 children involved with DCFS have been affected by their parents' HIV/AIDS-related illness and possible deaths.

There is good news and bad news about HIV.

With early intervention, there are combinations of medications to keep the viral load low so that people with HIV do not develop AIDS. Consequently, HIV is considered a chronic illness and people can live indefinitely with good care. Another piece of good news is that perinatal transmission of HIV from a mother with HIV to her unborn infant has been virtually eradicated. With good prenatal care and medication, 97% of all HIV-exposed babies are not being infected. This is a miracle.

The bad news is that if mothers with HIV do not know they have HIV, do not get good prenatal care, or do not take HIV medications, their babies will have a 33 percent chance of being infected during pregnancy or the birth process. The other piece of bad news is that in the U.S., half of all new HIV infections are among young people under age 25, with children and young people of color suffering a disproportionate impact. These factors suggest that child welfare professionals

should facilitate or counsel our youth about abstinence or safe sex, and ensure that all pregnant women get prenatal care.

Consult with the DCFS AIDS Project about any HIV related questions.

An HIV test should be considered for any infant or youth with a history of parental substance abuse, or when a youth has been sexually abused with penetration or is sexually active. The child's Healthworks provider can do the test under the CFS 415 Consent for Ordinary and Routine Medical Care. The provider should explain the purpose and results of the test to youth 12 and over.

Child welfare staff are required to contact the DCFS AIDS Project whenever they receive a case with a parent or child who is HIV exposed or infected. The purpose of this contact is to consult on the meaning of medical tests and to provide a good understanding of the treatment, precautions, and policy issues. This team can also facilitate medical and placement resources, as well as make a home visit to provide support services for the family. To provide the most compassionate care and service, it is most important to respect the confidentiality of persons with HIV/AIDS and to gain a good understanding of the medical and psychosocial issues they face.

AIDS Information/Resources

DCFS AIDS Project: 312-328-2285

Illinois AIDS Hotline:
800-243-2437

National Spanish AIDS Hotline:
800-344-7432

Project VIDA: 773-522-4570

VIDA/SIDA: 773-278-6737

Erie Family Health Center:
312-666-3494

Core Center: 312-572-4500

Trauma: Caseworkers experience it too – Part 1

By Julia Camacho

Trauma is the emotional reaction to traumatic stress, violent crimes, infectious disease outbreaks, and other dangerous and life threatening events.

Caseworkers and other social service workers experience trauma directly and indirectly in relation to the work they do. Examples of *direct trauma* are trauma by public sources such as the court system, law enforcement, and the medical profession. These sources often do not support the caseworker and may criticize the work they do especially when they are not in agreement with the worker. Workers can also suffer from organizational trauma, which includes high caseloads, high expectations, and scarce resources. Many times workers experience hopelessness and little chance of success.

Most trauma experienced by caseworkers is *indirect*. Indirect trauma is trauma experienced second-hand, usually through exposure to others who have experienced trauma directly. Examples include:

Compassion Fatigue is a term used to encompass different forms of indirect trauma. Charles Figley refers to compassion fatigue as the “cost of caring.” The very act of being compassionate and empathetic exacts a cost. The very essence of empathy and caring make one susceptible to his or her own feelings. Some researchers feel that compassion fatigue is an occupational hazard for the helping professions.

Compassion fatigue is also known as secondary traumatic stress, vicarious

traumatization, and secondary survivor stress. Compassion fatigue is an emotional stress response from exposure to client trauma and crisis that leads to a decrease in the ability to empathize with others.

Burnout is a syndrome of emotional exhaustion that closely resembles compassion fatigue. Burnout develops over time and repeated exposure to trauma. Burnout leads to depersonalization or flat affect in workers, which is evident in their relationships with clients, co-workers, and in their personal relationships. Other symptoms are a lack of energy and commitment to the job.

Vicarious traumatization when defined separately from compassion fatigue generally refers to changes in one’s own world view after being exposed to clients’ traumatic material. An example would be being afraid to walk alone after dark in a certain neighborhood when you previously felt safe and at ease.

A **Contagion Effect** occurs when the worker over identifies with the clients’ feelings and the worker experiences parallel feelings of his or her own.

Many caseworkers are at risk for compassion fatigue when they do not allow themselves an outlet for job and personal stress. Think you may be suffering from Compassion Fatigue? Take the Compassion Fatigue Self Test in Part 2 of this article available in the next edition of “Noticias.”

Las Octavitas 2006

By Miriam Mojica, MSW

The Hispanic Advisory Committee (HAC) sponsored the fifth annual “Las Octavitas” celebration on January 13, 2006. Fifty bilingual staff and guests attended the celebration even though rain and snow were forecast. The primary objective of the celebration was to provide an opportunity for new and senior bilingual staff to network and meet the HAC members.

A lot of preparation went into this event and HAC members paid all expenses and donated raffle items. As the chair of the HAC employee’s subcommittee, I felt it was important to bring our staff together and allow them to express their experiences in a neutral and supportive environment and also to interact with their peers.

Feedback received from the attendees included:

“I truly believe that this is a wonderful contribution to the Hispanic Advisory Committee. It is a great way to incorporate the Department employees outside of the work environment. The food, company, and music were great. I look forward to the next event.”

“Food was delicious! Music was great! People were beautiful! Keep up the good work! And for those people who did not show—shame on you! God Bless!”

More activities for bilingual staff are being planned. If you have any ideas for new activities, email me at MMojica@idcfs.state.il.us or call me at 708-338-6692. ¡Felicidades! y un prospero año 2006.

Quarterly Meeting with Director Samuels and the HAC

In addition to advocating within DCFS and the community, The Hispanic Advisory Committee (HAC) also serves as an advisor to DCFS Director Bryan Samuels and meets quarterly with him to discuss issues important to the Latino community. The September 29, 2005 meeting focused on immigration issues concerning children in care. The newly-implemented CAYIT and SACWIS were also discussed. Members also discussed ways for the HAC to participate in other aspects of our agency and community. One suggestion was to publish

articles in the *Illinois Families Now and Forever* newsletter, which is distributed to foster and adoptive families. This will give readers an opportunity to learn about the HAC and all that it has accomplished, as well as the efforts being made to support Latino children and families.

The Director was receptive to some of the ideas and concerns presented during the meeting. He also challenged the HAC to look more specifically on how to best address, train, and implement any needed



changes to ensure that clients are properly served and that staff have the knowledge, support, and tools to meet those needs.

A trip to Holland, and how I stayed there

By Rocio Perez, MSW

“Mrs. Perez, can you come pick up your son?” is a dreaded question that I have received from The School a few more times than I care to remember. I have a 14-year-old son with autism. As a result, I have had to learn about his disability and his rights as a special education student. However, I am also faced with planning for the present and the future.

There is a poem called “Welcome to Holland” by Emily Pearl Kingsley. It rings so true. It starts with planning for a much-desired trip to Italy and the excitement that comes with it. However, the plane instead lands in Holland. Once in Holland, what does the person do? Well, after getting over the initial shock and sadness, the person learns a new language, a new culture, meets new people, and appreciates what a beautiful country Holland is after all.

I now know what IEP, OT, ST, and PBIS stand for. I have gone to trainings on the Individual with Disabilities Education Act (IDEA). Now there is IDEA 2004, which I need to get “briefed” on. I can immediately relate with other parents of special needs children. We give each other knowing looks and share insight about staff, programs, and new “therapies” or “cures.” Yet, despite attending workshops, reading the law, and trying to understand the new changes, I still get anxious at school staffings. I feel a knot in my stomach. And I have to remember “to work within the system” and not against it. There are agencies and individuals who assist with trainings and with representing the student.

Tony’s elementary years had its ups and downs. The good years were a result of planning, willing teachers, and supportive support staff including his personal assistant. Everyone involved wanted it to work. The bad years came whenever there were too many changes for him. Staff was not prepared nor trained. It took time to figure things out. It also forced some difficult decisions over whether to introduce medication and/or look at an alternative school placement.

A combination of implementing the recommendations from a functional

analysis of Tony’s behavior and medication worked for him in the middle school years. Now however, he has entered adolescence, which is a trying time regardless of a disability. We have made modifications to his medication. I have been fortunate to have private insurance that has covered the therapies outside of school and the medications my son needs. But had I only an IDHS medical card, the choices of medications and choice of doctors knowledgeable about his disability would be limited. I would also experience longer waits for medical equipment. A pair of prescription glasses takes 6–8 weeks to fill. Individuals who are ineligible for Medicaid must rely upon a limited number of service agencies who have some unrestricted funds to assist them.

How a parent reacts to the reality of having a child with a disability is important to understand. Is there denial? Are there realistic expectations? Are they embarrassed by the disability? Are there built-in supports to assist the family in this journey to Holland? These are questions whose answers may change at any time. Service providers need to be aware of them. It is important to look for a window of opportunity whenever possible. From my personal experience, I can recall my sister trying to get me to take my son for a speech evaluation. I kept ignoring her. One day, my mother started talking to me in a different manner about the same issue. I was able to really “listen” to her and called the school that same day. That started my personal trip to Holland.

Oral and written communication is so important. What if I did not know the English language? How would I communicate with the school and service providers? Could I rely on friends and/or school personnel to translate exactly word for word what is being said and what I want to say. And those papers that as a parent I have to sign, if I can’t read them, is that really giving informed consent? And, if my legal status was undocumented, would I want to make “waves” by advocating for my child?

Another challenge is finding out about the services a person with disabilities needs.

Are there any in the neighborhood? If not, how far away is it? The family who is eager to get help for their family member may not have a car to get to the therapies, or the office hours conflict with work schedule. Once the family is at the center, there are other questions. Does the center have bilingual staff? How much will the services cost? Is there sliding scale payment available? Providing this information ahead of time allows the family to prepare and have realistic expectations.

Outside of school, are there opportunities to socialize in the community? Parents need to investigate what their local park districts offer—inclusive or segregated recreational programming. If there are none, then parents need to organize.

Individuals with disabilities can also be exposed to religion. The Catholic Archdiocese of Chicago offers Special Religious Education (SPRED) classes in various parishes. The Jewish faith also offers similar education. A few calls to the pastor, rabbi, priest, or minister could give a positive answer.

Then there are financial issues to consider. Assuming my son met the criteria: income guidelines, US legal residency, and proof of disability, we could apply at any time for Supplemental Security Income (SSI) program on behalf of Tony. There would be papers to file and a three to four month wait until his application would be approved. If it was denied, we would need to know that we could appeal because Social Security “likes” to deny. There are not-for-profit and private attorneys who specialize in filing appeals.

Once SSI is received, he could get a medical card and food stamps. However, we cannot assume that we will get the full payment which is currently \$545 a month. Social Security Administration deducts 1/3 for the lodging given to the family member. We will also need to have a separate bank account and report each year how the check is spent. My husband and I are fortunate to work at this time, so we have to wait until Tony turns 18, when our income is no longer looked at. Then barring any

changes to the program or threats to cut the SSI program, we would start the process as described above.

But what will happen to Tony once he leaves school at age 21? Well something I have told to many people, many times, is that in Illinois there are NO mandated services for individuals with disabilities. Unlike IDEA for the educational system, there is no federal law requiring services to be given. When students leave the school system, individuals such as Tony may find themselves at home waiting years to get into adult programs such as Developmental Training, Supported Employment and/or Unsubsidized Employment. That is why it is so important that parents get the best education for their children to prepare them for adulthood. Getting prevocational and vocational skills is highly recommended. This is an area where the schools and the parents must work together.

And while as parents we expect to be alive during our child's lifetime, in reality, our family member will likely outlive us. We need to have wills drawn up. We need to talk to our family or close friends about who will take the responsibility of legal guardianship. We cannot simply assume that siblings will take over. I, personally, do not want a judge who has no knowledge of my son to decide "who" has his best interest.

And even if we don't have Bill Gates' millions, spending time with a knowledgeable attorney to develop a special needs trust that covers expenses that the medical card and a SSI monthly check do not cover could be beneficial.

I want to end by saying I love my son. His behavior as a result of his own uniqueness has frustrated me at times. But I have met many wonderful people who share my journey.



Welcome to Holland

By Emily Pearl Kingsley

"I am often asked to describe the experience of raising a child with a disability—to try to help people who have not shared that unique experience to understand it, to imagine how it would feel. It's like this...

"When you're going to have a baby, it's like planning a fabulous vacation trip—to Italy. You buy a bunch of guidebooks and make your wonderful plans. The Coliseum. Michelangelo's David. The gondolas in Venice. You may learn some handy phrases in Italian. It's all very exciting.

"After months of eager anticipation, the day finally arrives. You pack your bags and off you go. Several hours later, the plane lands. The flight attendant comes and says, 'Welcome to Holland.'

"Holland?" you say. "What do you mean, Holland? I signed up for Italy! I'm supposed to be in Italy. All my life I've dreamed of going to Italy."

"But there's been a change in the flight plan. They've landed in Holland and there you must stay.

"The important thing is that they haven't taken you to a horrible, disgusting, filthy place, full of pestilence, famine, and disease. It's just a different place.

"So you must go out and buy new guidebooks. And you must learn a whole new language. And you will meet a whole new group of people you would never have met.

"It's just a different place. It's slower-paced than Italy, less flashy than Italy. But after you've been there for a while and you catch your breath, you look around, and you begin to notice that Holland has windmills, Holland has tulips, Holland even has Rembrandts.

"But everyone you know is busy coming and going from Italy, and they're all bragging about what a wonderful time they had there. And for the rest of your life, you will say, 'Yes, that's where I was supposed to go. That's what I had planned.'

"And the pain of that will never, ever, ever go away, because the loss of that dream is a very significant loss.

"But if you spend your life mourning the fact that you didn't get to Italy, you may never be free to enjoy the very special, the very lovely things about Holland."

HAC and African American Advisory Council Joint Meeting

By Dahlia Roman

In keeping with the tradition and collaborative efforts of two advisory groups, December 2005 marked a time of reflection, collaboration, and celebration. HAC and AAAC meet twice each year in order to share and work through the challenges that our families and children face.

Each meeting is hosted by one of the two groups. The last meeting was hosted by HAC and there were good spirits, food, and time to reflect on all that both groups accomplished in the last few years. The intent of the meetings is not only to share one another's concerns, but also to ensure that the needs of our children and families are being met.

The focus of this meeting was taking what had been accomplished with the Incarcerated Youth Project and move forward on the recommendations made in hopes of introducing policy and procedures that will support our incarcerated youth and their future. While more work is to be done with this development, many thanks went out to those staff and others who came to the table with much needed information, questions, case examples, and ways in which DCFS and the Illinois Department of Corrections can work together to ensure this population of youth has a chance to access appropriate services and suitable placements upon release, as well as to address many other factors that have an impact on their needs. Both groups will continue to work on this venture and hope to receive additional input from others.

Working Towards Reunification with Fathers

By Yolanda Capriles, M.Ed, M.J.

Traditionally, the courts have looked at the mother as the most appropriate parent to raise children. This view has been slowly changing as joint custody has become more prevalent. In the child welfare system, the courts also tend to work toward returning children to their mothers, in many cases because the whereabouts of the fathers are unknown. In cases where the fathers have been involved in the lives of their children, mothers are still considered the more appropriate parent to raise the children.

The question arises as to whether fathers can comply with the minimal parenting standards of the Department of Children and Family Services and take custody of their children. I would like to examine the barriers and protective factors that come into play when considering return home goals to fathers. I am particularly looking at Latino fathers who either have custody or are attempting to gain custody of their children. In some cases, where the parents have emigrated, the Latino fathers find themselves facing an unknown and complex legal system. The following is not intended to be an exhaustive list of factors for reunification. Nevertheless, each one is essential in order to obtain a return home goal.

Stable home environment: Those fathers who have been able to maintain a job and consequently to keep a permanent home, would also be more capable of providing the healthy routine that children need.

Family support system: To immigrate implies leaving family behind. Extended family such as adult sisters, mothers, and aunts willing and able to assist as supportive caregivers becomes a critical factor especially in cases with young children.

Continuous involvement with the children: Early involvement in their children's lives will facilitate the adjustment period after permanency. Fathers who learn how to do things such as prepare baby food, bathe children, and in general practice parenting skills that, culturally speaking, are skills women master, may be more in tune with their children's feelings and needs than those fathers who come late into their children's lives.

Freedom from chemical dependency

and alcohol: Drug and alcohol addiction carries on long lasting sequela requiring a great deal of motivation and compliance in treatment. Federal and state legislation have been enacted that significantly reduce the time frame for a parent to demonstrate that he or she has complied with requirements. These new deadlines will have a particular impact on a father who has a chronic substance abuse problem and is in treatment.

Development of parenting skills: The ability and conscious effort to learn and apply parenting skills is not an easy task. Some parents attend parenting classes reluctantly and miss the opportunity to integrate already proven and simple tactics on behavioral modification because they do not participate fully.

Therapeutic intervention: In most of the cases, therapy is a new experience and when mandated by court, the development of a trusting therapeutic relationship might take several months. Defense mechanisms, poor insight, distrust of the system, and inconsistent attendance are some of the factors affecting progress in psychotherapy.

Domestic violence and codependency with paramours. One factor inhibiting reunification with children and fathers completing services are the dynamics with their paramours. It is my experience that fathers, who even though they do not share the same household, continue having an erratic relationship with the non-compliant mother of their child and place themselves and their case in a difficult grey zone where progress is slow or at a standstill. The inability to break up the emotional codependency becomes a legitimate concern for the safety of the child.

While there are many factors that go into a successful reunification plan, it is essential to have workers who are trained to work with Latino clients to break down the identified barriers, to promote good parenting, to provide culturally sensitive services, and to help navigate the complex system for clients. Finally, it is also important for child welfare staff to be open and flexible to family constellations that could involve fathers becoming the primary caregivers for their children.

Teen Dating Violence

By Nisha Patel, LCSW, Domestic Violence Specialist, DCFS

In our everyday lives, we may often think that abuse in teen relationships is not that common or serious. However, this is a MYTH, and quite the OPPOSITE is true. In fact, 1 in 5 high school students reports being physically or sexually abused by a dating partner (MA Youth Risk Behavior Survey, 8/2001). Additionally, 60% of teens know someone who is in or has been in an abusive dating relationship (National Center for Injury Prevention and Control: A Study on Violence).

These alarming statistics make us ask the question “what is teen dating violence?” Teen dating violence is a pattern of behavior used by one adolescent intimate partner to gain power and control over his/her partner. Victims of teen dating violence report the abuse takes on many forms of violence, such as physical abuse, emotional abuse, and sexual abuse. Physical abuse consists of an abusive partner pushing, shoving, slapping, kicking, punching, choking, or restraining his/her victim. Physical violence also includes an abuser throwing objects at the victim, abandoning the victim in a dangerous place, and preventing the victim from seeking medical assistance after being injured by the abuser.

An emotionally abused teen may experience the abusive partner ignoring the teen’s feelings, making all the decisions for the teen, or humiliating the teen in front of others. A teen victim may also be continually criticized and ridiculed by the abuser, called names, or spoken to in a profane manner. Teens that are sexually abused by their partners are often forced to have sex, are called insulting sexual names, or are accused of having sexual activity with others. Abusive teens may also threaten to hurt or spread false rumors about the victim, if the victim refuses to engage in sexual activity with them (Rainbow House, DV Prevention and Education Program).

Given this knowledge about how abuse occurs in teen relationships, we may then ask “why doesn’t the victim just leave?” However, let’s ask instead, “what is making

the victim stay?” The latter question is less blaming of the victim, and is more exploratory of the dynamics of abusive relationships. Among the barriers to leaving an abusive relationship, an abused teen may have to see his/her abuser in school, and as a result, be afraid to leave for fear of retaliation. Or a teen may “break-up” with his/her abusive partner but continue to be threatened or harassed by him/her at school. Significantly, a teenager may also be unable to move to another town or state to get away from his/her abuser, as an adult may be able to do. Teens that have been isolated by their partners from other peers may be led to believe that they are “unlovable,” may experience low self-esteem, and as a result, decide that they cannot have a better relationship.

As we encounter an increasing number of youth in abusive relationships, it becomes important for us in child welfare to seek to educate ourselves and expand our knowledge base on this difficult and sensitive issue.

Teen victims may also deny the abuse because their abusive partner has trivialized the abuse or has put blame on the victim for its occurrence (Illinois Center for Violence Prevention, 2000).

Some warning signs of dating violence include when the abusive partner: acts jealous or possessive; tries to control his/her partner; tries to isolate the victim; makes threats; uses verbal or physical abuse; loses his/her temper quickly or acts violently; blames the victim and others for his/her problems; pressures his/her partner for sex; thinks he/she has the right to control the partner; or becomes serious early into the relationship (Sarah’s Inn, Teens Learning to Choose).

When some of these warning signs are observed, it’s important to engage in safety planning with the teen victim. A conversation should begin by telling victims that the violence is not their fault, and that they do not deserve to be treated in an abusive



manner. This is especially crucial when the teen has been blamed for the abuse by his/her partner. A teen should be asked about the pattern or cycle of violence s/he has experienced, and what happens within the abuse. In exploring what the teen victim can do to protect him/herself, you may discuss where the teen can seek support (e.g. parent, foster parent, teacher, counselor, relative, friend) and what the teen can do in an emergency situation (e.g. save money in a safe place, call or go to the police/hospital). As part of safety planning, we must always ask the teen victim about the abuser—how dangerous is s/he? Does s/he own a gun? Has the abuser made threats to kill the victim? It is imperative to remember that the victim may be in the greatest danger when s/he tries to get away from or terminate the relationship with the abuser, and planning for safety must keep this consideration strongly in mind (Rainbow House).

As we encounter an increasing number of youth in abusive relationships, it becomes important for us in child welfare to seek to educate ourselves and expand our knowledge base on this difficult and sensitive issue. For more information and services for teens, contact: Sarah’s Inn (708-385-4225); Between Friends (773-274-5232); or Rainbow House (773-762-6611).

If you need a case consultation or are interested in having a presentation on Teen Dating Violence at your office, contact Nisha Patel, Domestic Violence Specialist, at 708-338-6691 or Npatel@idcfs.state.il.us.

My Christmas Holiday in Mexico

By Evelyn Martinez

A long time friend once told me that my Mexican family threw so many dinner parties throughout the year that she believed if someone got a new pair of socks it was reason enough to get together and celebrate. Perhaps holidays are really just another reason to come together to share a meal and a good time. These past couple of years, our family has done Christmas differently. Some of my family has been able to travel to Mexico and spend the holidays there together. We don't have the luxury of a big tree and tons of presents but we share the time together away from our routine and hurried lives in Chicago. We traveled back to our hometown in Michoacán, Mexico. My niece and nephew who were also along for the trip learned the traditions of celebrating Christmas in Mexico. We all participated in the posadas and celebrated with piñatas and included the real reason for the season by attending church in a historic cathedral.

Posadas are a tradition and mainstay among Mexicans in mostly smaller towns in Mexico. It is a Christian tradition of the re-enactment of Mary and Joseph seeking shelter prior to the birth of baby Jesus. Posadas literally means “shelters” or places to stay. Several days before Christmas, one can see daily processions of children following a donkey or mule with a little girl dressed as Mary on top and a boy dressed as Joseph pulling the mule. They are all singing songs about the event and openly invite others to join them in the procession and in song. They travel like this from one house to another until a predesignated home opens their doors to everyone in the procession to come in for holiday punch and sweets to end the day. In the evenings, many of the streets are closed off temporarily for piñatas to be broken by the neighborhood children and families.

Our family celebrated with these traditions but we added a twist on the holidays by running away after Christmas to the sun and beach in Zihuatanejo, for a few days of relaxation and fun. On January 6, Three Kings Day, we got together as a family for dinner and small presents. It also happens to be my father's birthday, and that is even more reason to celebrate. We partake in sharing a rosca de los reyes. This is a ring-shaped sweet bread with a little plastic toy (usually a baby Jesus) baked somewhere inside of it. The person who gets the piece of the bread with the baby Jesus in it is expected to throw the next dinner party at their home within the next month. And so, my family continues the tradition of coming together and sharing a good time until the next new pair of socks gets purchased.

Three Kings Day Holiday

By Miriam Mojica

Three Kings Day (Día de los Tres Reyes Magos) is based on the account of the three Magi who traveled to Bethlehem with gifts to honor the baby Jesus. On the eve of Three Kings Day, Puerto Rican children cut grass to put in a shoe box which they place under their beds for the camels to eat. Their wish lists are placed on top of the grass. The Reyes only come if the child has been good all year. On this night children sleep lightly listening for any strange noises, whispers, the sound of the camels' hooves, or any other telltale signs of the kings' arrival. Sometime during the night, the Reyes arrive quietly leaving their gifts for the children while their camels enjoy the food.

In the morning the island is filled with the joy and laughter of happy children playing with their new toys left by the three kings. It is a joyful day full of festivities. Later, holiday dinners are prepared and friends and relatives join together to celebrate.

The three kings arrive before dawn on January 6, traditionally referred to as Epiphany, and is celebrated as the day in which the three Magi arrived bearing gifts for the Christ child. The tradition of Los Reyes Magos in Hispanic/Latino families is taken very seriously. The three kings are Persian magi (magicians) of the ancient Medes and Persians. This name is also applied to the wise men from the Bible who followed a star to Bethlehem.

Christian tradition from about the seventh century names the magi. Melchor (Oldest of the Magi, Saint Melchor's feast day is January 7) brought Gold to Jesus. Gaspar (Saint Gaspar's feast day is January 6) brought frankincense, an exceedingly aromatic gum resin used in sacred incense for service. Baltazar, the third magi (Saint Baltazar's feast day is January 8) brought myrrh, also an aromatic resin and ingredient of holy ointment. The three Magi were also called the Three Kings of Cologne.



On the days immediately after Three Kings Day, the Octavas or Octavitas are celebrated. Octavitas is a cultural tradition that calls for the Christmas season to be extended eight days after the Epiphany. During this time there is more gift giving and celebration. Three Kings Day is an important holiday for Puerto Rican and other Latino children and it is important to celebrate and to pass this tradition on from one generation to another. No matter where we live, our culture and heritage will always be the most valuable treasure we can leave our children.

Las Posadas and other Hispanic Christmas Traditions

By Julia Camacho de Monzón

Las Posadas, a traditional Mexican celebration, dates back to the 16th century when St. Ignatius Loyola incorporated the nine-day celebration of the Aztec Sun god with a Christmas celebration that taught native Aztecs about the birth of Christ. Las Posadas (The Inns) begins on December 16, and lasts through December 24, Christmas Eve. From a novena, nine days of prayer, Las Posadas has become a national celebration. During each night of Las Posadas a procession of children portraying Mary and Joseph, sometimes riding a real donkey, are followed by families and musicians, many in costume as they re-enact Mary and Joseph's search for lodging the night that baby Jesus was born. At the third designated house a singing dialogue is begun that leads to the "innkeepers" opening their doors to their neighbors and family. This is where the party begins. Although the celebration usually includes a piñata, ponche (holiday fruit punch), tamales, and buñuelos (fried pastries) there are no presents until El Día de los Reyes, which is celebrated in Mexico as well as other Hispanic countries.

On Nochebuena, Christmas Eve, most people attend a midnight mass then eat dinner at home with family. On this night the baby Jesus is added to the nativity scene found in most Mexican homes. Las Posadas is the traditional Christmas break for schoolchildren, and many government offices are also closed.

On New Year's Eve most people attend another midnight mass, la misa de gallo, to give thanks for all the year's blessings. On El Día de los Reyes many people enjoy la rosca de reyes, which is a big oval wreath made out of egg bread with dried fruit and sprinkled sugar on top. A little ceramic doll that represents the baby Jesus is hidden inside the wreath. Whoever gets the piece of bread with the doll automatically hosts the last party of the season, El Día de la Candelaria, or Candlemas, also known as the Day of Purification on the church calendar. On that day, February 2, the nativity scene is dismantled and the season ends with a traditional dinner of tamales.

In Spain, El Día de los Reyes is also celebrated as is Nochebuena, and Los Reyes

Magos. During the holiday season, the three kings make appearances at hospitals and orphanages bearing small gifts. One tradition not found elsewhere are the hogueras, or bonfires – the observance of the winter solstice, the shortest day of the year. People jump over small bonfires to ward off illness.

In Ecuador, the Pase del Niño Viajero in Cuenca, Ecuador is celebrated on December 24, with a parade much like a posada, but bigger, which ends at the Catedral de la Inmaculada for mass. Baby Jesus is called the Niño Viajero (Child Traveler) because in 1960 a statue of the baby Jesus was taken to Rome to be blessed by the Pope. When the statue returned it was dubbed the Niño Viajero. Ecuadorians also have three other Christmas parades, the first on the first Sunday of Advent, the Pase del Niño on January 1, and ending with the Pase del Niño Rey on the eve of El Día de los Reyes. During the nine days before Christmas there are many novenas, public gatherings of prayer, hymns, religious poetry, and snacks. Nativity scenes are called pesebres.

In Venezuela the season also begins on December 16, and pesebres are seen everywhere. An early morning service called Misa de Aguinaldo is celebrated between December 16 and December 24. On Christmas Eve in Caracas, children tie a string to one of their big toes and hang the other end out the window. The next morning people roller skate to church and pull on any string they see hanging down.

Children in Peru receive gifts in stockings hung near handcrafted manger scenes usually made from clay. Presents are opened after midnight mass and fireworks are usually part of the celebration. In Lima there is a traditional Christmas Day bullfight and a procession honoring the Virgin Mary. Peruvians also enjoy la rosca de reyes on January 6, El Día de los Reyes.

In Colombia pesebres also appear beginning on December 16, but the holiday actually begins on December 7 with the Candle Light, when families and shop owners adorn walkways and curbs with lighted candles. On December 8, many Colombians celebrate the



Argentinean depiction of the Magi.

Sacred and Immaculate Conception Day. The Novena de Aguinaldo is usually celebrated around a pesebre. Gifts are exchanged after midnight on Christmas Eve. Some people have Christmas trees, but children usually find gifts at the foot of their beds on Christmas morning. On El Día de Reyes, the holiday ends.

In Brazil the manger scene is called a Presépio (bed of straw). Papai Noel or Father Noel brings gifts to the children. Although the idea of la misa de gallo still exists in Brazil, it is usually held in early or late afternoon. One common tradition is the "amigo secreto" or secret friend. At the beginning of December people draw names. These names are not revealed and throughout the month people use aliases to exchange messages. On Christmas everyone gathers to reveal the identities of the secret friends and exchange gifts. Since December is summer in Brazil, many people go to the beach on Christmas morning.

It is also summer in Argentina during the holiday season, and people use cotton as snow to decorate their trees. On Christmas Day Argentineans often go caroling. Christmas dinner is usually outside and children receive gifts on January 6, courtesy of the Magi.

In Chile gifts are given by el Viejo Pascuero (Old Man Christmas) who drives a sleigh with reindeer, or in some parts of Chile he rides a llama. Manger scenes are prominent and gifts are exchanged on Christmas Eve after la misa de gallo.

As you can see, Latinos have many Christmas traditions with a strong emphasis on religion. If you would like to see your traditions featured next year, let us know by sending an email to Maria Calderón. We at "Noticias" wish you a great New Year!

Bilingual special education for Latino children with special needs

By Mario Barrales

The educational system in America is currently facing a series of challenges not only in monolingual and bilingual mainstream classrooms, but also in the bilingual special education classrooms across the nation. This research article describes briefly the six basic principles of special education legislation, and analyzes briefly the referral process, placement practices, and instruction of bilingual special education.

To ensure each child is provided access to a free appropriate public education is necessary to understand the six basic principles of special education legislation. The first principle, Zero Reject, is based on the concept that all children with disabilities, no matter the severity or type of their disabilities, are entitled to receive a free and appropriate public education. The second basic principle is Non-discriminatory Assessment. After students have been included in the public schools, it is necessary to provide them with an appropriate diagnosis, program plan, and educational placement which can only be achieved through a nondiscriminatory assessment. To meet this mandate school districts have the responsibility to assess English language learners in both their native language and in English to deliver

the most appropriate diagnosis, program plan, and educational placement. The third principle is Procedural Due Process. Procedural Due Process safeguards the rights of all persons involved in the provisions of educational services for children with disabilities. The fourth principle is Parental Participation, which allows parents to be included as part of the multidisciplinary team (MDT). To ensure the delivery of the third and fourth principles of special education, school districts provide proficient bilingual and bicultural interpreters to interpret conversations at school meetings, and to translate assessments, Individualized Education Programs, and any other related documentation to ensure parents are included at all times. The fifth principle, Least Restrictive Environment (LRE), is based on the assumption that the preferred placement for students with disabilities is the regular classroom. The final principle, The Individualized Education Program (IEP), is central to the provision of an appropriate education for a child with disabilities. An IEP is both a process for developing an appropriate program for a child with a disability and a product/document that directs the education of the child. As a process the IEP is to be developed collaboratively between parents and school personnel. During the IEP process, collaboration between the school personnel and parents is vital. In fact, the IEP is a document that supports parental participation and shared decision making within the educational process. To ensure the IEP process is developed according to federal regulations, it is important to learn from research the challenges school districts face throughout the entire process.

One of these challenges is the disproportionate referral and consequently placement of African American and Latino students in learning disabilities programs; this is considered a troublesome situation for the learning disabilities field (Artiles & Trent, 1994) because it has been reported that learning disabilities is the largest category served in special education programs in different regions of the

country (Harry, 1992). Although the formal evaluation and referral process whereby children identified as at risk has changed (MacMillan, Greshman, Lopez, & Bocian, 1996) there is enough evidence to demonstrate that Latinos and African Americans have greater chances of being in special education programs (Artiles, Aguirre, Muñoz, & Abedi, 1998). That is why it is of vital importance and our responsibility as child welfare professionals, parents, and foster parents to provide regular classroom teachers with all the necessary information about the unique challenges children in foster care have faced and face to help teachers understand the “unique world” of each one of our children. This practice will allow regular classroom teachers to modify lessons to meet the unique needs of our children. If we do not inform and involve classroom teachers in the lives of our children most likely they will continue referring them indiscriminately for formal evaluation. This practice often translates into a one-way ticket for our children to special education programs because most of the times children are evaluated and educated by unqualified professionals. In the state of Illinois, teachers in high-poverty schools tend to have less education and are considered less qualified under federal standards than are their counterparts in low-poverty schools. Forty percent of teachers in high-poverty schools have master’s degrees or higher, compared with 53.1 percent of teachers in low-poverty schools (Illinois State Board of Education [ISBE], 2003).

Special education eligibility decisions and placements of bilingual students are also a challenge in the IEP process as they are based on a comprehensive individual assessment, which is comprised of standardized norm-referenced tests across four domains: cognitive, behavioral, physical, and developmental. However, there is compelling evidence that traditional assessment procedures, driven by the use of norm-referenced tests, are inappropriate for English language learners. Reliance on traditional practices, even when adapted for English language learners, results in the





misdiagnosis of bilingualism as a disability, Figueroa (2000). Thus, English language learners should be assessed in both their native language and in English. Otherwise, the results of the evaluations could provide wrong conclusions about the student's language skills. Limited English proficiency is often misinterpreted as a disability, while a disability is sometimes misinterpreted as limited English proficiency. In the first case, the student who does not need special education receives it, while in the second case, a student who needs special education does not receive it. In neither case does the student receive what he or she needs. These situations are common in school districts because most assessment personnel have often been taught to assess in English and have not been trained to understand the interaction among disabilities, language, culture, and other student characteristics.

Another endeavor the bilingual special education programs are facing is the delivery of appropriate classroom instruction. Bilingual students in special education classrooms cannot receive the same instruction monolingual (only English) students receive because they migrate from Latin American countries, generally from Mexico, and are a largely mobile population once they are in the United States (Gottlieb, Alter, Gottlieb, & Wishner, 1994). That is why it is vital for schoolteachers and child welfare professionals to learn from research which classroom practices and methodologies are the most effective to develop the literacy of Latino

students with special needs. One of the literacy programs for bilingual students with special needs is The Optimal Learning Environment (OLE) Program, which is a writing-as-a-process writing instruction program based on sociocultural learning theory (Bos & Fletcher, 1997; Ruiz, 1995a). This program has demonstrated through research to be one of the most successful programs for bilingual students with special needs. In addition to OLE, there is a program that

focuses on reading, writing, listening, speaking, functional living skills, mathematics, and interactive journals (Graves, Valles, & Rueda, 2000). A second program delivers instruction reviewing keywords and listening previewing in single group lessons (Rousseau, Yung Tam, & Ramnarain, 1993). A third program incorporates reading, listening, talking, and writing into the writing-as-a-process writer's workshop while a fourth program integrates reading, writing, listening, speaking, and math activities to deliver instruction (Graves et al).

In sum, the statistics demonstrate that Latino and African American students have a greater chance of being placed in special education programs in certain regions of the country (Artiles et al. 1998) and that instruction strategies and cultural considerations determine the academic growth, and in some cases the return to mainstream classrooms, of bilingual children in special education classrooms. That is why it is extremely important to collaborate with school professionals and paraprofessionals to create a strong team, which will deliver consistent education to our children. This integral and comprehensive education will allow our children to grow academically, become independent, and become productive citizens in today's society, which will allow them in the future to advocate for themselves and explore a world of opportunities.



Congratulations to our Bilingual MSW and MA Graduates!

Honored at the DCFS
Hispanic Institute Day,
November 10, 2005

***“El Logro de Uno Es
El Exito De Todos”***

Martin Acevedo

Victor Aranda

Jeanette Camarillo

Richard Echevarria (MA)

Rosa Frias

Jose Garcia

Miriam Mojica

Cecilio Ever Perez (MA)

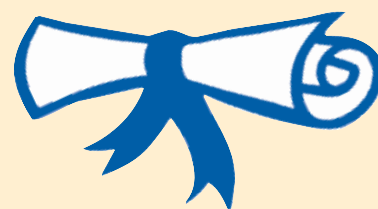
Rodrigo Remolina

Milagros Rivera

Nancy Rodriguez

Rafael Serrano

Clara Yanes



Noticias is brought to you by the Hispanic Advisory Committee and the Illinois Department of Children and Family Services. It is distributed to DCFS employees, POS agencies, and agencies affiliated with DCFS. The newsletter includes articles pertinent to child welfare, Latino welfare issues, and DCFS/POS programs, and strives to be an informative source for staff by providing updates on new child welfare initiatives as well as upcoming events.

It is our hope to continue providing staff with a vehicle for the sharing of information. In this endeavor, we are looking for your input, submission of articles, and suggestions for improving *Noticias*.

Articles related to your experiences with families and personal stories are also greatly appreciated. Please submit articles, information about upcoming events or news to:

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If you would like more information or would like to participate in one of the HAC subcommittees, contact Miriam Mojica at MMojica@idcfs.state.il.us.



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